


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # M05000003642	
1. Entity Name AVONLEA ANTIQUE MALL, LLC	

Principal Place of Business 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731	Mailing Address 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731
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DO NOT WRITE IN THIS SPACE



02222008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 32-0150307	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WATSON, TODD
7785 BAYMEADOWS WAY, SUITE 107
JACKSONVILLE, FL 32256

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

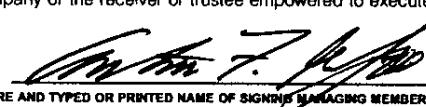
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRAF, ARTHUR F III 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ORTON, JOHN R 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731
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05/15/08-80011-025 138.75

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  DATE: 4/22/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #